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In the Company of Nurses:
The History Of The British Army Nursing Service In The Great War
Edinburgh University Press, October 2014

Yvonne McEwen.

Presented for an Award of the Degree PhD by Research Publication.
The University of Edinburgh. April 2016.

Thesis Statement

I declare that this published work was composed by me, that the work contained herein is my own except where explicitly stated otherwise in the text, and that this work has not been submitted for any other degree or professional qualification except as specified. The work has been published as *In The Company of Nurses: The History Of The British Army Nursing Service In The Great War*.

Date of Submission

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## **Abstract**

*In the Company of Nurses: The History of The British Army Nursing Service in the Great War, Edinburgh University Press 2014.*

This is the first monograph to be published on the work of the Queen Alexandra's Imperial Military Nursing Service (QAIMNS) in the Great War. The historiography of British military nursing during this period is scant, and research based monographs are negligible. What exists, does not focus specifically on the work of the Queen Alexandra's Imperial Military Nursing Service, (QAIMNS) the Reserve, (QAIMNSR) or the Territorial Force Nursing Service (TFNS) but tends to concentrate on the work of the volunteer, untrained, Voluntary Aid Detachment (VAD) nurses. Unfortunately, this has resulted in factually inaccurate representations of British WW1 nursing.

The mass mobilisation of nurses by professional and voluntary nursing services led to rivalry between the different groups and my research addresses the relationship that developed between the trained and volunteer nurses.

Also, my research examines the climatic and environmental conditions that impacted upon the effective delivery of nursing and casualty care and the mismanagement of services and supplies by the War Office and the Army Medical Services. Additionally, the political controversies and scandals over inadequate planning for the care, treatment and transportation of mass casualties is addressed.

Furthermore, diseases and traumatic injuries sustained by nurses on active service are examined and, shell-shock, hitherto considered a combatants' condition is cited in relation to mental health issues of nurses on active service. Moreover, my research

examines the deaths and disability rates within the ranks of nursing services. My research features individual awards for acts of bravery and mentioned in Dispatches.

On the Home Front the politics of nursing are addressed. Nurses campaigned for professional recognition and many were supportive of universal suffrage and they argued for both professional and personal liberation. The struggle for professional recognition led to divisions within the civilian nursing leadership because they failed to arrive at a consensus on the content of the Nurse Registration Bill. Also, the supply of nurses for the war effort was consistently problematic and this led the Government to establish the Supply of Nurses Committee. Before it had its first sitting it had already become contentious and controversial. The issues are discussed.

Using extensive primary sources, the monograph moves away from the myths, and uncritical and overly romanticised views of WW1 military nursing. It is hoped that by examining the personal, professional and political issues that impacted upon nurses the monograph will make a significant contribution to the historiography of WW1 military nursing and to the history of the Great War more generally.

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In the Company of Nurses:
The History Of The British Army Nursing Service in the Great War
Edinburgh University Press, October 2014

Presented for an Award of the Degree PhD by Research Publication

In the Company of Nurses: The History Of The British Army Nursing Service in The Great War was commissioned by the Queen Alexandra Royal Army Nursing Corps (QARANC), and it is the first in a series of publications that aim to address the work of the Corps in 20th century wars and conflicts. The objective is to preserve the history of the Corps.¹

The first volume of *In the Company of Nurses: The History of The British Army Nursing Service in The Great War* examines the work of the Regular and Reserve Forces of the Queen Alexandra's Imperial Military Nursing Service (QAIMNS), the forerunner of the QARANC.²

The book commission was timely because it arrived at a stage where my own research interests were examining the professional, personal and political consequences of military nursing in WW1. Additionally, I was keen to address the overly romanticised, long-held shibboleths about the work of the British and Irish women who served in the military and voluntary nursing services between 1914 and 1919. Undoubtedly, *It's a Long Way to Tipperary: British and Irish Nurses in the Great War*,³ my first monograph on WW1 nurses, was an attempt to secure the truth about their divergent roles and explore the value and authenticity of their work and I have continued to build on my earlier research.

Historiography and Method

Literature Review

In order to establish the prominence of the QAIMNS within the historiography of the war and contextualise their work in the global conflict, I carried out a literature review. Under the categories 'WW1 medicine', 'nursing' and 'military nursing' my search parameters included books published in Britain, France, Russia, Germany, Italy, Canada, Australia and New Zealand between 1915 and 2014. The literature search did not include medical and nursing journals of the time, or pamphlets.

I found approximately 1,300 citations which related to WW1 nursing. My analysis of the literature highlighted that, within the 1,300 publications, approximately 144 books were written about nurses or nursing practice and 66, of the publications originated in Britain. For all that, it must be emphasised that the literature review is not definitive and no such claim can be made. However, the British sampling did show that despite the sizeable number of trained nurses serving in or with the QAIMNS on the various fighting fronts, the historiography is dominated by volunteer nurses' publications.

In the centenary of WW1 there still exists a great deal of confusion regarding the different nursing services and their respective roles in the conflict. At the outbreak of the war there were less than 400 trained nurses serving in the QAIMNS; by the end of the hostilities, 10,300 had served in the Regular and Reserve Forces. The total number of trained and untrained nurses serving with the Imperial Nursing Service on the various fighting fronts was 23,931 including 2,894 from the Dominions and

America.⁴ The untrained, volunteer nurses, worked with the British Red Cross Society or the St John's Ambulance Brigade Voluntary Aid Detachments (VADs).

The second group of volunteers were trained nurses who worked in independent units outwith the control of the War Office and the military nursing services.

The volunteer literature falls into the general categories of diaries and memoirs and most of the books were published between 1915 and 1922. The evidential value of the volunteer nurses' writings is variable. Many were produced as first-hand accounts of their war service, but their 'eye-witness' testimony does not always stand up to scrutiny because, from what we have subsequently learned about the rules and regulations of nursing at the front, some of their experiences are inherently improbable.⁵ Furthermore, in the published memoirs of the British Red Cross and the St John's Ambulance Brigade VAD nurses, who were contracted to serve in military hospitals, we learn very little about their relationship with the trained nurses because there is a dearth of information about their personal interactions with, and their observations of, the nurses serving in the Regular and Reserve forces of the QAIMNS.⁶

QAIMNS World War One Historiography

Unfortunately, despite the prominence of the QAIMNS on the various fighting fronts their written history does not amount to a substantial body of work; what does exist is best described as scant and research-based monographs are negligible. Traditionally, their narrative has been integrated or incorporated into the general history of British nursing and as Anne Summers argues, military nursing has been 'relegated to a footnote in Nightingale history'.⁷ However, WW1 was a watershed for the QAIMNS and for military nursing history. In 1915 the QAIMNS earned the distinction, albeit unintentionally, of being linked to the first wartime published book based on the professional and personal experiences of a QAIMNS nurse. The book, titled *Diary of Nursing Sister on the Western Front*, was published anonymously in 1915.⁸ The author was K. E. Luard, a sister serving in the Reserve Force. Despite the fact that she had breached the Defence of the Realm Act (DORA) by publishing her experiences of serving on the Western Front in the first nine months of the war, the book was received with critical acclaim. I have written a chapter on the political, personal and professional consequences of her actions in my edited monograph *War, Journalism and History*.⁹ However, my literature review suggests that no other books were published by members of the QAIMNS between 1914 and 1919.

The first post-war book to examine the work of the QAIMNS in the Great War was *Reminiscent Sketches* which was compiled from submissions sent in 1919 by Anne Beadsmore Smith, Matron-in-Chief, QAIMNS, to Lady Norman, Chairwoman of the Women's Work Sub-Committee at the Imperial War Museum.¹⁰ The book consists of a small collection of personal accounts written by members of the QAIMNS and the

Reserve, and it also includes experiences of those serving in the Territorial Force Nursing Service (TFNS). These cover descriptions of work in France at a base hospital and in a hospital for officers and they also refer to nursing work carried out in a casualty clearing station, a hospital train and a hospital ship; beyond the Western Front, there are examples of nursing in Italy and North Russia. Although some of the sketches are very frank, detailed and insightful, others give a sense of similarity to patriotic propaganda literature. For all that, given the size of the nursing complement and the geographical distribution of the services, it is disappointing that the content is limited and that so few chose not to respond to the request for first-hand accounts of their work.

Clearly, the lukewarm response is reflected in the content of a letter sent by Miss Beadsmore Smith to Lady Norman: "I hope, however, to have some more of other theatres of war at a later date".¹¹ Unfortunately, as far as can be ascertained, there were no further submissions and, as a result, there is little information on the work of the QAIMNS in Macedonia, Mesopotamia, Palestine, East Africa and India. Nevertheless, the relatively few sketches submitted to Lady Norman's committee have regularly featured in a variety of publications and they have assumed legendary status. Copies of the original sketches, amounting to 14 submissions in all, are housed in the QARANC archives.

In 1923, Elizabeth Sanderson Haldane published *The British Nurse in War and Peace*. This book covers the work of Florence Nightingale, the struggle by nurses for professional recognition, the formation of the QAIMNS and the TFNS, and the rise of the VADs.¹² The book also covers military nursing in WW1. It is an ambitious publication, and it covers milestones in the development of civilian and military

nursing. Yet, the narrative is descriptive and is primarily based on secondary sources which is surprising considering she held an advisory role on the Nursing Board of the QAIMNS and was also involved with the development and formation of the VADs and the TFNS. Even so, her knowledge and experience of the nursing services and the development of professional nursing are evidenced in her text, which she wrote with clarity and authority.

Thirty years later, Major-General John Hay Beith, C.B.E., M.C., attempted to write a concise history of the QAIMNS, and for this he was well qualified: John Hay Beith was a teacher, and also a WW1 soldier, novelist, essayist and playwright. During WW1 he served on the Western Front as an officer in the Argyll and Sutherland Highlanders. He was one of Lord Kitchener's first 100,000 recruits into the British Army in the early days of the war. In 1915 he produced a book titled *The First Hundred Thousand* which became an immediate success and is still cited on the WW1 recommended reading list as one of the most important contributions to British WW1 literature.¹³

John Hay Beith had a great admiration and respect for army nurses and he wanted to pay homage to their qualities and professionalism by publishing a history of British Army Nursing. Following negotiations with senior members of the QARANC, a publication was authorised. Consequently, however, in the preparation of the manuscript, Hay Beith encountered difficulties with some of the senior members and this would appear to have influenced the content and size of the book. Nevertheless, a book was eventually published under the title *One Hundred Years of Army Nursing*.¹⁴

The book begins with a short overview of the care of soldiers in the pre-Nightingale era before highlighting Florence Nightingale's role in the Crimean Campaign and also covering nursing care in the South African War (Boer War). A considerable amount of the book content addresses the work of the QAIMNS in WW1 and WW2. Furthermore, the administration of the nursing service and a summary of its work is covered in the final chapters. Additionally, the book cites a limited number of names, orders and decorations awarded to QAIMNS, the Reserve and the Territorial Force. This is not a referenced work but Hay Beith does draw on selected papers from the Army Nursing Services archival material.

Yet, despite Hay Beith being a well-known author and highly regarded for the power of his prose, there is a sense that the book is not all that it could have been, and that, for whatever reason, a grand ambition was thwarted; this may have been the result of the difficult relationship which had developed between the author and some of the senior members of the Corps. Nonetheless, the book is a valuable contribution to the historiography of the QAIMNS and British military nursing history.

In 1975, under the Famous Regiments series, Juliet Piggott published *Queen Alexandra's Royal Army Nursing Corps*.¹⁵ The book covers much of the same ground as Hay Beith's work and draws on many of the same sources. It starts with a broad sweep of information on the origins of army nursing and then moves to cover Florence Nightingale and the Crimean War, the South African War, the formation of the QAIMNS, the First World War and the inter-war years, the Second World War and the subsequent establishment of the QAIMNS as a Corps within the British Army, when the service became Queen Alexandra's Royal Army Nursing Corps (QARANC). The book is not an in-depth study of the QAs, it is descriptive not

critical with the narrative focusing on specific events and achievements. Yet, as the author rightly points out, one of the main difficulties in writing the book was the absence of an official history of the Corps.

Although the book is a non-referenced work, Juliet Piggott does list in the foreword the sources used for the book's production and she acknowledges the individuals who assisted her with additional information. However, despite the limited use of primary sources, the book is a supportive addition to the earlier work of John Hay Beith. The author is not unfamiliar with the military services; her father had been a military attaché, and she served in the Women's Royal Naval Services during WW2.

In *The Roses of No Man's Land*, Lyn Macdonald draws on personal interviews, diaries and letters to tell the story of not only the professional and volunteer nurses in WW1 but also the doctors, stretcher bearers, chaplains and soldiers in British and American units.¹⁶ However, there is only a small number of QAIMNS and QAIMNS Reserve (QAIMNSR) accounts, most of the commentary coming from VADs. When published in 1980, the book was an immediate success and 36 years later it is still in print. According to the foreword, the author spent two years 'researching and preparing' the book; this included 'hundreds of hours talking to octogenarians who were nurses, soldiers, orderlies and doctors'. The book is a pioneering piece of literature because it is primarily constructed from first-hand and eye-witness accounts. Lyn Macdonald's methodology has, to a great extent, influenced the use of oral history as primary source material. However, as a note of caution, there is no indication in the book to suggest the author met the 'eye-witness' criteria for testing the veracity of the witness statements.

Despite being a non-referenced work, the book gained authority and immense popularity, primarily due, arguably, to the use of the veterans' oral histories. Furthermore, the subject of WW1 casualty care had been under-represented in the historiography of the war and, clearly, a public and professional appetite existed for further information. It is not surprising that Lyn Macdonald chose the oral history format - she was, after all, a journalist, and worked for the BBC as a researcher and radio producer. The print and broadcast media are dependent on eye-witness accounts and primary sources; and she was therefore working with mediums that were familiar and successful.

In 2001, Eric Taylor published *Wartime Nurse: One Hundred Years from the Crimea to Korea* which covers much of the same material and eras as the Hay Beith and Piggott publications.¹⁷ However, Eric Taylor expands the narrative to include the war in Korea, and the wartime experiences of civilian as well as military nurses. The book's descriptor states, '*Wartime Nurse* recounts the amazing exploits of the nurses working in battle zones during the 100 years spanning wars from the Crimea to Korea - years when such nurses struggled for official recognition'.

To support his text, Eric Taylor draws on a small amount of primary and secondary source material from the Public Record Office, the Imperial War Museum, the National Newspaper Library, the BBC Film Archives and the United States National Archives' collections as well as the nursing journals of the time. Considering the breadth of the book, it is not a critical work and the archival sources are not extensive, but, unlike the afore-mentioned publications, a small number of references is included in each chapter. Eric Taylor is another author with personal knowledge of the military and warfare. In WW2 he was an infantry officer in North Africa and

Italy and later served as an RAF squadron leader in Germany. He has authored several books on WW2, and a collection of his work addresses the role of women in the services. His military background and experiences of war are evidenced in his knowledgeable and sensitive construction of text.

In 2002, the QARANC marked its centenary with the publication of an illustrated history. The title of the book, *Sub Cruce Candida*, is the motto of the Corps, which translates as 'Under the White Cross'. The motto was chosen by Queen Alexandra, the first President of the QAIMNS, because it represented the cross of the Order of Dannebrog from her native country, Denmark.¹⁸ The book was compiled by members of the QARANC, Colonel Eric Gruber von Arni and Major Gary Searle. According to the authors, the main purpose of the publication was 'to provide a general record of the work of Army nurses' and it was, they explained, 'never intended to represent a definitive history of the Corps'. Consisting primarily of photographs, and extracts from the letters and diaries of members during the service's one hundred years' history, the book is beautifully presented, the narrative covers the evolution of military nursing dating from the establishment in 1662 of a hospital for the British Garrison at Tangiers. It is the only book in the cited collection that includes a chronology of British military nursing up to the formation of the Army Nursing Services in 1881. Although it is primarily an illustrated history, the accompanying text is well written and informed.

In 2006, I produced *It's a Long Way to Tipperary: British and Irish Nurses in the Great War* which is the first monograph to deal solely with the experiences of British and Irish nurses in WW1.¹⁹ It was written because I believed that the role played by British and Irish professionally trained nurses in the First World War had been

almost completely ignored by the nursing profession, nurse historians and historians generally. When I wrote *It's a Long Way to Tipperary*, I attempted to redress the historical portrayal of WW1 nurses by placing the work of the trained military nurses at the centre of the narrative. Furthermore, I wanted to explore the consequences, if any, that war work had on their physical and psychological health. The book contains my initial research into the health and causes of death of WW1 nurses and I have continued to build on my line of enquiry. Additionally, in my writing, I gave voice to the nurses by using a selection of their personal diaries, letters and submissions to nursing journals. The book content is both descriptive and critical but, unfortunately, one of the publisher's conditions was that the work could not be referenced. However, despite the elimination of sources, the book was considered a success. In fact, coinciding with the WW1 centenary commemorations, there has been a growing demand for the reprint of the book, but with the inclusion of references.

In 2009, the nurse historian, Christine Hallett, published *Containing Trauma*, a monograph on WW1 nursing, which is a heavily referenced work drawing on multiple sources.²⁰ The book examines the work of British trained and volunteer nurses. It also makes reference to the work of the Australian, Canadian and New Zealand nursing services, and nurses working in independent units outwith the control of the War Office and the Army Nursing Services. In addition to the primary source narratives, the book draws on the fictional and autobiographical writings of socialites, thespians, and aspiring writers who worked as volunteer nurses. Despite the extensive use of archival sources, the book deals primarily with nursing practice and unfortunately does not address or contextualise the work of nurses within the larger wartime or professional issues.

Interestingly, the author is clearly influenced by the autobiographical or semi-fictional writings of the untrained volunteer nurses, which include dramatic and graphic text seldom found in the writings of trained, professional nurses. The trained nurses who worked in military hospitals, casualty clearing stations, ambulance trains and hospital barges were constantly exposed to human suffering. Unlike some of the volunteer authors, they were cognisant of patient anonymity, confidentiality, and ethical considerations; they generally refrained from moral judgement and they exercised self-censorship. There is only one, recently published diary of a QAIMNS sister's experience of serving on the Western Front. Unfortunately it includes the names of patients, therefore, for ethical reasons and issues of sensitivity, I excluded the publication from the historiography.²¹

From my literature review it would appear that, for the most part, the history of women ministering to the sick and wounded during this period has been associated with volunteer nurses. This representation is, in the main, due to the body of literature produced during the war or directly afterwards. Undoubtedly, the most famous English language book about WW1 volunteer nursing is *Testament of Youth*, Vera Brittain's autobiographical study of her life between the years 1900-1925.²² The book was first published in 1933 and the longevity of its success is primarily due to the detailed description she gives of her life as a VAD nurse serving in London, Malta and France. The book, considered by many to be the authentic voice of the nurse at war, has, unfortunately, come to dominate the literature and beliefs about nursing in WW1.

Sadly, in the centenary of the First World War there are still confusion and misconceptions about who was actually nursing the sick and wounded, and long-held

shibboleths are hard to change. The image of the young, pretty and upper-class VAD nurse has enjoyed great popularity, no doubt because they are well represented in WW1 literature. Their image has certainly been reinforced in the memoirs and diary entries of sick and convalescing soldiers. For example, after an encounter with VAD nurses in a Home Front hospital, the author J B Priestley described them as 'all County, with pretty faces straight out of the *Tatler* and *Bystander*, and so spotless and vivid in their uniforms that they looked like nurses in a musical comedy'.²³ Recovering in a hospital after one of the Somme engagements, Second Lieutenant H. E. R. Mellersh described his emotional encounter with a VAD nurse, 'I'm in love with a beautiful nurse. Mine, ours was a VAD with the violet blue eyes and dark hair of an Irish girl, which she was'.²⁴

While the image of innocent, self-sacrificing ladies of good social position ministering to the casualties of war might appear attractive, the reality was that, numerically, on the fighting fronts, they were only a small part of the nursing contingent, with 2,217 serving out of a total of 23,931 nurses on active service.²⁵ The women who nursed in, and managed, the casualty clearing stations, base hospitals, hospital barges and ambulance trains were over thirty years of age, middle-class, determined, dedicated, trained professionals and the value of their work has, to a great extent, been obscured by the high profile image of the VAD nurse.

Considering the size of the military nursing service in the global conflict and the geographical distribution of the members, it is surprising that when given the opportunity by the QAIMNS Matron-in-Chief to detail their war experiences, only a handful chose to do so. No doubt there were many personal, professional and ethical reasons for their silence and I have addressed this issue in the monograph.

In summary, what we have to date in the British historiography of WW1 nursing, is a small, well-intentioned but incomplete history of military nursing in the pivotal years from 1914-1918. The existing historiography is primarily constructed from secondary sources. With the exception of Christine Hallett's work, *Containing Trauma* the monographs are descriptive not critical. However, *Containing Trauma* for the most part is focused on nursing practice and, like the other cited publications, the work of the military nursing services is not contextualised within professional, personal and political frameworks. Arguably, what we have is information about their work but what the historiography lacks is knowledge regarding the totality of their experiences. Having identified the gaps in the historiography, along with my own research interest, I have tried to produce a monograph which is more reflective of the work of the nursing services and representative of the personal costs of their labours.

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## **Description and Critique of *In the Company of Nurses: The History Of The British Army Nursing Service in the Great War***

*In the Company of Nurses* is a new perspectives on the QAIMNS and Reserve. The military nurses who served in WW1 did not live or practise in a vacuum. They had personal and professional lives and political aspirations. Through my research I have tried to represent the, at times, competing and conflicting demands of being on 'active service'. The book is not a feminist analysis of the women who served in the British military nursing services although there are feminists who would argue that war is a gendering activity.<sup>26</sup> The book is both descriptive and critical and the content is primarily based on the extensive use of primary source documents.

The structure of the book is influenced, in part, by ancient Greek drama and how stories were told to the public. Moreover, in military history, the term 'theatre of war' is often used when referring to a geographical area of conflict. The word 'theatre' is derived from the Ancient Greek *théatron* (θέατρον), a place for viewing, and perhaps the word has more significance in warfare than is readily appreciated. In warfare, as in the theatre, we view high drama, tragedy, humour, pathos and farce.

The Greek drama production consisted of the *Prologue* which gave the mythological background necessary for understanding the events of the play. This was followed by the *Parodos*, which dealt with the beginning of the story or episodes. The drama continued with the *First Episode*, the first of many episodes, when the characters and chorus talked and sang. The drama continued with the *First Stasimon* which reflected on the things said and done in the episodes, and put them

into a larger mythological framework. The drama concluded with the *Exodos* which usually offered words of wisdom related to the actions and outcome of the drama.<sup>27</sup>

I chose Greek drama because of its effective use of storytelling and in books I, II and III, I use 'episodes' as an effective way to tell the story of the QAIMNS in WW1. Also, traditionally, the Greeks waged war every six months so they were not unfamiliar with war and its consequences. Furthermore, it could be argued that one of the greatest masterpieces of poetry and storytelling about war is Homer's *Iliad*, the epic poem about the Trojan War.<sup>28</sup>

*In the Company of Nurses*, begins with *Acknowledgements* followed by the *Introduction*. The book is then divided into three sections, each section dealing with different aspects of the war, apart from Chapter 1 which examines the evolution of military nursing. The subsequent chapters follow the chronology of the war. The *Introduction* consists of the British historiography of military nursing in WW1. I also address memorialisation and why, for the most part, we have failed to address the work of the QAIMNS and Reserve in the pivotal years 1914 and 1919.

**Book I, *In the Lap of the Gods***, opens with a quote from Virgil. Book I includes chapter 1.

**Book II, *The Wrath of the Gods***, opens with a quote from Sophocles. Book II includes chapters 2, 3, 4 and 5.

**Book III, *In the House of the Gods***, opens with a further quote from Sophocles. Book III includes chapter 6.

## **Chapter 1, *Magic, Miracles and Myth: The Genesis of Military Nursing***

In the opening chapter, I have broken with convention by addressing the origins of military nursing which, contrary to mythology or perceived wisdom, did not start with Florence Nightingale's role in the Crimea. As I demonstrate in this chapter, men and women had been delivering care to the sick, injured and destitute for centuries. In times of warfare there was a long-established, though informal, practice of men and women supplying care and comfort for armies and navies. Moreover, I examine the evidence of nursing and the healing arts in antiquity, citing practice and development in India, Ceylon, Egypt, Greece and Rome. For example, it was the Emperor Augustus who formed a professional military medical corps and there is evidence to suggest there may have been some form of organised battlefield casualty care. Additionally, the chapter includes developments in wound management and pain relief. The chapter concludes with the Crusades and the physical and spiritual needs of pilgrims and combatants. Throughout this turbulent period, thousands died from climatic conditions, malnutrition, disease or wounds. As I discuss, the first organised, coordinated and financed military nursing service, the Knights Hospitallers of St John of Jerusalem, was established during the Crusades, not as commonly believed by Florence Nightingale during the Crimean Campaign.

## **Chapter 2. *Did the Conflict Breed Conflict? The Politics of Caregiving***

In this chapter, I address the 1914 politics of caregiving and nursing care. At the outbreak of war the two major voluntary societies, the British Red Cross Society and the St John Ambulance Association were in dispute about their respective roles in support of the Royal Army Medical Corps (RAMC). Additionally, there was duplication of effort, particularly with fund raising activities. Therefore, the two voluntary bodies were compelled to combine their efforts for the duration of the war and the Joint War Committee (JWC) was established in 1915, with equal representation on the management and finance boards. The JWC became a powerful fundraising force, and central to its activities were the VADs, who were attached to either the Order of St John's Ambulance Association or the British Red Cross Society.

The prospect of introducing unqualified, volunteer nurses into military establishments created a political storm in the nursing press, and with nurse leaders such as Ethel Bedford Fenwick, Editor of the *British Journal of Nursing*, a nurse and long-time lobbyist for the state registration of trained nurses. Furthermore, within the ranks of trained, professional nurses, there was a belief that volunteer nurses were being used at the expense of trained nurses. In this chapter, my research examines the response of trained nurses towards VADs whom they believed to be a threat to their profession and livelihood. In addition to the Home Front caregiving issues, the chapter also examines the first four months of the war on the Fighting Front and the major difficulties faced by the RAMC and the QAIMNS about how to deliver effective casualty care when the War Office was ill-prepared for the conflict. The chapter includes the early work of the ambulance trains at the Front and the

makeshift hospitals. Furthermore, in this chapter, my research addresses the Parliamentary debates relating to the inadequacy of casualty care arrangements in the early months of the conflict. Also, the death of the first QAIMNS nurse to die on active service is acknowledged.



### **Chapter 3. *Lies, 'Limelighters' and Nursing in the Land of Troy***

This chapter begins with a diary entry from a QAIMNS Reserve sister. It is dated 1st January 1915 and she bemoans the start of the New Year. The sister arrived on the Western Front at the beginning of the conflict and, as her diary entry indicates, by the end of 1914, nurses and troops alike were enduring different kinds of miseries. She cites a breakdown in her health and the health of a colleague. This chapter is particularly focused on health and morale issues amongst the nursing services and the troops. Also, the first appearance on the Western Front of shell-shock and gas poisoning is introduced in this chapter. The nursing work in treating both conditions is discussed. Furthermore, in this chapter the field of military operations moves to the ill-fated Dardanelles campaign resulting in casualty care scandals and questions being raised in the House of Commons. Additionally, I focus on the strenuous work of the sisters serving on hospital ships during the Dardanelles campaign, and the pitiful conditions of some of the makeshift hospital ships and hospitals in Egypt. Furthermore, I highlight the role *the Nursing Mirror and Midwives Journal* played in exposing the situation. Also, in this chapter, the frustrations, demands and, on many occasions, the hopelessness of delivering effective care is vividly described in the diary entries of RAMC medical officers, orderlies and the QAIMNS Sisters.

#### **Chapter 4. *The Scandal of Battles and a Battle with Scandals***

The chapter starts with a reflection on the 1915 casualty care scandals in the British Mediterranean Force (BMF) expeditions to the Dardanelles and Mesopotamia. Also, the hardships and health implications for British and Dominion Forces nurses working on the Greek island of Mudros are highlighted. Food, filtrated water and hospital supplies were seriously deficient and the tented accommodation for hospitals and billets was inappropriate for the weather conditions. Also, in this chapter the scandal of supplying drugs (cocaine) to soldiers on leave is highlighted, and the Government and nursing press responses.

Additionally, this chapter discusses the establishment of Special Commissions to investigate the military and medical management of the Dardanelles and Mesopotamia campaigns. Furthermore, the debates regarding the Nurse Registration Bill and the formation of the College of Nursing are addressed. This chapter also includes the casualty care arrangements for the Battle of the Somme, the introduction of special centres for shell-shocked soldiers and the first specialist nurse to be appointed to a pioneering shell-shock centre on the fighting front. The other issues discussed are the shortage of trained nurses and the committee established by the Government to investigate the problem. The chapter concludes with the last phase of the Somme battles.

## **Chapter 5. *Casualties, Consolidation and Cameos of War***

In this chapter, I take, as an example of the work carried out in base hospitals in Northern France, the war diary of No 26 General Hospital. In 1915, No. 26 was a new unit not yet functioning at full capacity. In one year it was treating a variety of injuries and conditions. By 1917, it was a specialist treatment centre for fractured femurs, shell-shock and skin conditions. The chapter takes the reader through the step-by-step journey of casualties arriving at the hospital through to admission, treatments and discharge to home hospitals or back to their unit at the Fighting Front. The duties of the matron, sisters, medical officers, VADs and orderlies are detailed depending on their role or speciality. The chapter also highlights the developments in nursing practice. Furthermore, No. 26 was a very close-knit unit, primarily fostered by the warmth of the senior medical officer and matron. It is clear from the hospital war diary and the supporting personal papers of staff that respectful and affectionate bonds were established between the nursing and medical staff. This chapter deals with the more detailed aspects of hospital life that hitherto has not been discussed in the British military nursing historiography.

In addition, it describes the bombing raids on base hospitals or casualty clearing stations, emergency evacuations and the loss of life within the nursing ranks. The chapter also gives a brief account of nursing on the Salonika front, the progress of the Nurse Registration Bill, the findings of the Special Commissions set up to investigate the Dardanelles and Mesopotamia campaigns and the Government's Supply of Nurses Committee.

## **Chapter 6. *Daughters of Arête***

In this chapter the physical and psychological effects of the war on nurses is addressed. I discuss in-service deaths and procedures, trauma-related deaths and injuries, psychological injury and suicide. I highlight examples of the rest clubs established for nurses on the Home Front, pension rights, honours and awards. The chapter concludes with public and professional remembrance of the work carried out by the QAIMNS and associated nursing services.

**Appendix 1: *Nurses Awarded the Military Medal***

**Appendix 2: *Nurses' Disabilities and Pensionable Years***

**Appendix 3: *Nursing Deaths***

**Bibliography (attached)**

**Index**

## **Originality of the Book and Scholarly Standards**

I have chosen to focus my research on issues which I believe have received little attention or have been neglected or mythologised in the historiography of British WW1 nursing. They are as follows:

### **A. The Nursing Environment - The Complexities of Wartime Nursing and Caregiving.**

The environment played a significant role in the way casualty care was delivered. The environment issues I address are physical, climatic and hazardous, for example:

- Working in dangerous and hostile environments.
- Working without adequate facilities, equipment, staff and supplies.
- The practical and personal demands of working in casualty clearing stations, hospital trains, hospital ships and barges.

I consulted the military and medical official histories, *Hansard* and Parliamentary special commissions, the war diary of the Matron-in Chief for France and Flanders, nursing journals, nurses' diaries, letters, service and pension files to illustrate the demands made on military nurses.

### **B. The Struggle for Professional Recognition and Universal Suffrage.**

The burning professional issue for trained nurses before the outbreak of the war was the Nurse Registration Bill. In the summer of 1914 a petition was presented to the Prime Minister on behalf of the Central Committee for the State Registration of Nurses but the Nurse Registration Bill was not the paramount concern of the Liberal Government: it was far more concerned about another

section of women in society - suffragettes. Many trained nurses were part of or sympathetic to the 'Votes for Women' campaign. I examine:

- The Nurse Registration Bill.
- The establishment of the College of Nursing and the politics of professionalisation.
- Enfranchisement.

Information was drawn from The Royal College of Nursing Archives, Parliamentary papers, The National Archives, The Army Nursing Board minutes and reports, the nursing press, the medical press and national press.

### **C. The Professional Relationship Between Trained and Volunteer Nurses.**

From the existing historiography it would appear there has been little attempt to access primary sources regarding the politics of caregiving between the trained and volunteer nurses. The use of unchallenged secondary sources and anecdote has led to the creation of a mythology which is embed as a belief into the historiography. I believed it was important to understand the politics of the situation and how it was handled by the respective organisations.

I consulted the British Red Cross Archives for reports and minutes of meetings, the war diaries of the Matron-in-Chief for France and Flanders, the personal papers of Dame Katharine Furse, Commandant of the VAD (The British Red Cross Society), the personal diaries and papers of trained and volunteer nurses, and the nursing press.

### **D. The Politics of Caregiving and Controversies over Inadequate Casualty Care and the Subsequent Parliamentary Investigations and Special Commissions.**

I examined the role of military nurses in the fields of military operations where there had been widespread public concern about the care of casualties. The demands of working in a hostile environment and highly charged political climate are addressed. I also raise the question about culpability, and reporting. Information was sourced from Special Commission reports, Parliamentary debates and papers, official histories, unit war diaries, personal diaries, and the nursing and medical press.

#### **E. The Physical and Psychological Health of Nurses on Active Service.**

My research examined their exposure to sickness, disease, physical and psychological injury. Additionally, I also make reference to suicides. I include examples of rest and recuperation facilities that were donated for nurses on active service and on the Home Front. Service files and pension files from the National Archives, Kew were sourced. Additionally, official war diaries and reports, personal letters and diaries, the national and nursing press were consulted.

#### **F. War Related Deaths Within the Ranks of the Services.**

No definitive list has ever been established regarding the deaths of the nurses who died on active service or as a direct consequence of their war service. My research draws on multiple sources to establish the number of nurses, trained and volunteer, who died as a direct consequence of their war work. I consulted the Commonwealth War Graves Commission (CWGC) Rolls of Honour, Scottish National War Memorial, the British Red Cross Archives, Nursing Archives in the Army Medical Services Museum, The Royal College of Nursing, Imperial War Museum, National Army Museum, National Archives Kew, National Archives

Scotland, Public Record Office Northern Ireland, The Irish Republic National Library, the nursing press, national and local press and church magazines.

**G. Establishing the Military Honours Awarded to Nurses - Military Medal, (with accompanying citations), Mentioned in Dispatches, and the Royal Red Cross.**

The bravery of nurses on active service was reflected in the number of honours awarded. There were 86 Military Medals awarded and 1,755 nurses were mentioned in dispatches (MiD). National Archives Kew, Imperial War Museum, National Army Museum, National Archives, Royal College of Nursing, nursing journals, pictorials, war pictorials and newspapers were sourced for information.

**Note:** Complete, detailed sources are listed in the attached bibliography. Furthermore, although not implicit in the text, I use novel sources of information such as WW1 poems, photographs, paintings, cartoons, stitch work, autograph books, concert programmes and war hospital magazines.



## **Additional Strengths and Limitations of the Book**

### **A. QARANC Collection, Documents, Diaries and Papers - Archival Limitations**

When commissioned to write the history of the QAIMNS I was unaware that there was a limited archive to call upon. What did exist primarily focused on the work of nurses on the Western Front. However, not only were there limitations on the QARANC archival sources, there were restrictions on my access to what existed.

The biggest problem in writing the book was accessing QAIMNS primary sources and there were times when the book was near to being abandoned. Also, due to a lack of QAIMNS official documents, nurses' letters or memoirs, the book does not cover all theatres of military operations. Furthermore, I discovered the QARANC archives were not as extensive as the Corps believed them to be and, quite often, what did exist was not made readily available to me. It is customary for a commissioned or official historian to have privileged access to the archives but the Trustees of the Army Medical Services Museum denied the request; however, I was fortunate enough to have the late Professor Keith Jeffery, a highly regarded and distinguished historian, advocate for my exclusive use of the papers. Professor Jeffery had experience of being an appointed official historian and he was aware of the importance the position held and of the direct and exclusive access to the archives. However, despite his intervention the request was denied on the grounds of 'public access to documents'. Also, I was later to discover that approximately 125 boxes of the Army Medical and Nursing Services Archives were sent to the Wellcome Foundation in the 1970s (on loan) and had lain in their storage units, uncatalogued, for nearly 40 years. The archives were returned just before the

publication of the book. I subsequently learned some of the archives contained QAIMNS. diaries, documents and photos. Additional searches in the Imperial War Museum (IWM), the National Army Museum and the RCN Archives did not uncover a substantial body of evidence on the life and work of the QAIMNS. Also, there was duplication of papers in the QARANC archives and IWM.

It had always been my intention to cast the net wide in my lines of enquiry. I examined the on-line collections of the Australian and Canadian WW1 archives. The Australian archives are superb and there is an excellent, comprehensive archive on the Australian Army Nursing Service. Some of the documents are replicated in the IWM.<sup>29</sup> The documents tell us a lot about their work and conditions and I have made reference to the Australian Nursing Service in the book. Also, I used extracts from the war diary of a Canadian sister serving in the Canadian Army Medical Corps.<sup>30</sup> However, I had to temper the use of Dominion Force documents because the book is about the experiences of the British military nursing services. Therefore, they were used to corroborate and support the limited amount of QAIMNS narratives, not as replacements or substitutes for the few of QAIMNS archives available.

Furthermore, when the Committee for Medical History of the War approached the War Office in 1918 for information on the Nursing Services, it was not well received. Major Brereton, who was responsible for compiling the Medical History, requested Ethel Becher, Matron-in-Chief, QAIMNS, to provide information on the work of the nursing services, which she refused to give him. Subsequent enquiries led to an exchange of letters with the War Office and Major Brereton was informed that 'Miss Becher could only be made to yield material for the women's section by superior orders from the Surgeon General, and she is not in sympathy with the

writing of history'.<sup>31</sup> The problem for any historian attempting to write the history of the nursing services started with Miss Becher's refusal. It is impossible to construct a history if the main player will not cooperate. Furthermore, Miss Becher left no diaries or official papers. An exhaustive archives search has brought little if any information to light on her time in high office. There are no known personal archives of the Matron-in-Chief, and subsequent enquiries have been fruitless. However, the Matron-in-Chief for France and Flanders, Maud McCarthy, kept a War Diary which covers the work of the nursing services in France and Flanders from the beginning of the war until demobilisation.<sup>32</sup>

The diaries on first reading are very impressive but when compared with contemporaneous reports they become less agreeable. It is perfectly clear that Maud McCarthy had a very positive image of herself and the service and was not prepared to have anything ruin that perception or reputation; her diaries, therefore, have to be read with a degree of caution. As a day-to-day document on nursing administration it is very impressive but it is laced with self-promotion and effusion on the work of the nurses. At the time, almost everyone recognised the professionalism and dedication of the nursing services, and while it was important to maintain a record for posterity, it is difficult to reconcile her actions during the war with those less co-operative subsequently. Furthermore, in the absence of the Matron-in-Chief's war diaries and papers, we have a unilateral view of the nursing administration. It is clear from Maud McCarthy's diaries that a degree of tension existed between the two women and therefore interpretation of her diaries is problematic, as we read only one side of the extensive communications and reports and have no idea how they were perceived or

acted upon by the Matron-in-Chief; it is the equivalent of listening to one side of a conversation or argument.

For all that, the authenticity of first-hand or eye-witness statements needs to be tempered with caution because memory is selective and fallible. Furthermore, consideration should be given to witness bias, the proximity of witnesses to the events or event and how they interpreted their observations and communicated their experiences. I work on the Cornelius Ryan principal of wartime investigation which is to find at least three corroborative statements or documents to authenticate the event or experience.

## **B. Publisher's Restrictions**

In addition to the limited QAIMNS source material, the second biggest problem producing the monograph was the publisher's restriction placed on the word count. I was contracted by Edinburgh University Press to produce a 100,000 word manuscript. Unfortunately, the final manuscript ran to 130,000 words and 'sympathetic' editing was required. The chapters were edited, and one full chapter was not published. The unpublished chapter covers 1917-1918 and reflects on the developments in military medicine, and the skill sets and enhanced knowledge gained by the military nursing services. Historically, it covers the last year of the war on the various fighting fronts and the expanding work of the nursing services. Additionally, I introduce novel adjuncts to care, and morale building for patients and nurses alike, such as concert parties, art work, music, autograph books, stitch work and animals. They were, I believe, important to the atmosphere of cure and care, friendships and camaraderie. In chapter 6, I was required to edit the post-war physical and psychological aftercare of military nurses and public acknowledgement

of their war work such as the controversial Nations Fund for Nurses appeal. I also raise questions for further research such as the value of the nursing press during and post conflict. The silent voices of QAIMNS and Reserve nurses, and issues of silent culpability in the casualty care scandals.

However, despite the reduced manuscript, five months after its publication the book went to reprint. Due to the ongoing success of the book a second edition will be published in 2017 and the edited chapter and additional material will be included.

In summary, despite my restricted access to the QAIMNS archives, the limited content of what I did examine and the publisher's conditions, my use of wide, varied and novel sources has allowed me, I believe, to highlight and explain the professional conflicts, personal demands and political controversies for the military and civilian nursing services.

## **Importance of the book to the historiography and body of knowledge**

In his book, *A War Imagined: The First World War and English Culture*, Samuel Hynes argues that 'War - any war - is for women an inevitably diminishing experience. There is nothing like war for demonstrating to women their inferior status, nothing like the war experiences of men for making clear the exclusion of women from life's great excitements, nothing like war casualties for imposing on women the guiltiness of being alive and well.'<sup>33</sup>

Through my research, I have been able to demonstrate that, contrary to Hynes' belief, war was not a diminishing experience for women, it actually emboldened many of them to step forward and take up opportunities and challenges that hitherto had been denied to them. Arguably, the women who served in the WW1 military nursing services did not have a 'diminishing experience' nor, as my research and book suggests, did they suffer from 'inferior status', or 'exclusion from life's great excitements'. Also, with regard to 'the guiltiness of being alive and well', there were, according to my research, in excess of 500 nurses who lost their lives on active service or as a direct consequence of their war service. Additionally, having accessed over 400 nurses' service and pension files in the National Archives at Kew, it is clear that life and work on overseas duties had been physically and emotionally challenging for nurses, and as my research highlights, 'well' was not a description of many who served. Furthermore, if, as Hynes suggests, there was 'guiltiness of being alive and well', he appears to be taking an anachronistic view of the alleged condition, 'survivor guilt syndrome'. However, his arguments are speculative and they are not supported by empirical evidence.

Much of our knowledge or misinformation about WW1 comes from literature, not history books. In fact, WW1 has been described as a literary war. As I previously alluded to in this submission, Vera Brittain's wartime autobiography has constantly been referenced as the authentic voice of the dedicated, long-suffering WW1 nurse. She certainly gave voice, but the veracity of her statements has not, I believe, been subjected to rigorous critical analysis. For example, in *Testament of Youth*, she describes the relationship between VADs and trained nurses.

*The attitude to VADs was typical of the nursing profession as a whole, especially in England (She often, incorrectly refers to England instead of Britain) where the introduction of semi-trained Red Cross probationers into military hospitals had pushed to a crisis the thirty-year-old struggle for the registration of nurses. The Matron at Camberwell was always scrupulously just to us in practice, but we must have been bogies to her in theory, for she and other promoters of state registration evidently visualised a post-war professional chaos in which hundreds of experienced VADs would undercut and supplant the fully qualified nurses. Actually, this fear was groundless; all but a few VADs were only too thankful when the war was over to quit a singularly backward profession for their own occupations and interest, but many 'trained women' having no such interest themselves, could not believe that others were attracted by them. The presence of Red Cross nurses drove some of them almost frantic with jealousy and suspicion, which grew in intensity as the VADs increased in competence.<sup>34</sup>*

This extract is best described as unhelpful to our understanding of the relationship that existed between the trained and volunteer nurses. However, my research does illustrate the concerns that trained nurses had at the beginning of the war about the security of their jobs post-war. As I have demonstrated, the nursing press was particularly vociferous on this subject. But, due to the exigencies of the war, hardened attitudes had to change and while wholesale approval was never a feature in the professional nursing discourse, there was at least, a recognition that the needs of the casualties were greater than the politics of nursing care.

According to Penguin Classics, who produced a reprint in 2005, 'Much of what we know and feel about the First World War we owe to Vera Brittain's elegiac yet unsparing book, which set a standard for memoirists'.<sup>35</sup> This statement is truer than some of the statements in the book and with such a vast readership, it is not surprising that, in the centenary of the war, disinformation still exists about the respective roles of and the relationship between the trained and volunteer nurses. The lack of clarity regarding the trained and volunteer inevitably has led to a misleading fusion of identities. The feminist writer and Professor of English, Margaret Higonnet, argues that, 'Nurses' text offer a fresh perspective on the canon of war text'.<sup>36</sup> Unfortunately, she does not make the distinction between trained and volunteer nurses. Nurses are not a homogenous group. Arguably, the 'fresh perspective' is more a lack of appreciation of the diverse roles and environments, and the diversity of care and casualties.

One of my research objectives was to address the mythology that obscures the historical distinction between the trained and volunteer nurses. In chapter 2, specifically, *Did the Conflict Breed Conflict*, I address the politics of the VAD issues and continue with the theme throughout the book.

However, one of the most clarifying moments for me about what is missing in the body of knowledge about the nursing in WW1 was reading Vera Brittain's description of the nursing profession as being 'singularly backward'.<sup>37</sup> My research, concluded that if there was ever a time when knowledge was gained and professional nursing practice enhanced it was during the war years of 1914-1918.

In *Margin Released*, J.B. Priestley described the hospital he was admitted to at Le Tréport in France as a, 'clean white extension of the war world I had lived in for the



past year'.<sup>38</sup> The analogy is interesting; in casualty clearing stations, base hospitals, ambulance trains and hospital ships the staff waged a war against disease and infection and they battled against the traumatic effects of the killing technologies. The genesis of modern day trauma care originated in the hearts and minds of those who served in the diverse hospital facilities and the nursing services were central to the delivery and success of the pioneering work and innovative practice.

In my 2006 book on WW1 nursing, I said that nurses provided a 'safe haven...where traumatised soldiers could express their feelings of fear, despair and shame'. I argued that nurses contributed significantly to the early development of 'physical and psychological trauma care' and that, had the nursing profession been more aware of its wartime historical identity and achievements, it might have been recognised as the foremost authority on trauma care, rehabilitation and survivor issues.<sup>39</sup> I have not altered my opinion, and *In the Company of Nurses*, I question why nurses did not act upon or share their hard-earned experience and why, for the most part, they chose silence over expression. Returning to the theatre of war analogy, traditionally, their role was akin to a walk-on part with no lines to say; though war had given them centre stage and a voice, only a few chose to speak during the tragic epic and very few took the opportunity to deliver the lines that were so important to our understanding of the tragedy and the roles played by nurses.

It could be argued that in Britain, the nursing profession and nurse historians have been slow to take an active and intelligent interest in one of the most significant periods of personal and professional development and it is unfortunate that the profession has failed to recognise the importance of nurses as the custodians of their own history. I also believe there is at play, a 'fear of offending' a school of thought

where it would be sacrilege or irreverent to examine or question the 'good works' the military nursing services. War has consequences for all the participants, and nurses were not exempt from harbouring anger about the appalling situations they found themselves in and feelings of hostility towards those who created the problems. Overt criticism was met with removal from the service.

The painting by Sir William Lavery on the monograph cover was chosen for a variety of reasons, not least because the fine illustration of the distinguishing uniforms worn by the military and volunteer nursing services. However, the subjects are without discernible facial features and their anonymity dominates the painting. There lies one of the fundamental issues with the history of WW1 military nursing - anonymity, defined by what they were, not who they were. In ancient Rome, the term *Damnatio memoriae* - 'damnation of memory' - was used to dishonour those who fell out of favour or were disgraced. It was the practice to remove or defile the features of the individual from statues or illustrations with the intent of erasing their memory from history. Although not the subject of disgrace, Sister Currier and Nurse Billam who posed for Lavery's painting are without facial identity and they are defined only by their uniforms. For whatever reasons, Lavery chose to highlight what they were rather than who they were. Those 'invisible healers' and thousands like them made the system of casualty care possible and bearable. Even so, for the most part, the personal cost of nursing in those pivotal years of professional development has remained under-researched. The physical and psychological cost of their labours, and the loss of life within their ranks are seldom recognised or commemorated on. In fact, it could be argued that certain aspects of the nurses war experiences were not to

be memorialised and resulted in *de facto damnatio memoriae*. The 'invisible healers' became professionally invisible.

Through my research findings I have attempted to give depth and texture to their lives and profession and hopefully my work will go some way to rectifying the historical neglect of the personal cost for many nurses. To be sure, the women who served in the military nursing services were not only versatile skilled carers but also, innovators, pioneers, and - survivors. Historians, I believe have not been honest or kind to their story. However, in my attempt to rectify the imbalance, it is to be hoped my research and publication will be of historic, educational, and literary merit, and that it will make a significant contribution to the historiography of military nursing.

Furthermore, it is anticipated the style in which *In the Company of Nurses* was written will be of reference value and assistance to researchers, health-care personnel, the military, and to the general public.

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